

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE:

CASE NO 15-04885 ESL

DANIEL RODRIGUEZ ROSA

CHAPTER 13

Debtors

* * * * *

DEBTOR'S AMENDMENT OF SCHEDULE
AND STATEMENT OF THE PURPOSE OF
THE AMENDMENT

TO THE HONORABLE COURT:

Debtor in the above captioned case; hereby amend Schedule I attached amended documents, for those originally filed, pursuant to R. Bankr. P. 1009.

- 1- Debtor requests the amendment of the Schedule I to modified debtor's income.

Notice is hereby given that unless a party in interest files a written objection to the Amendment of schedule within twenty-one (21) days from the date of the notice indicated herein below, then the Court will enter an order approving the Amendment of Schedule without further notice of hearing.

In San Juan, PR this 14th day of August 2015

CERTIFICATE OF SERVICE: That I electronically filed the foregoing with the Clerk of the Court using CM/ECF system which will send notification of such filing and that I have mailed the documents to the all non CM/ECF participants, Creditors and parties in interest as per the Master address list.

/S/WILBERT LOPEZ MORENO, ESQ 202707
Representing Daniel Rodríguez Rosa
1272 Jesús T. Piñero
San Juan, Puerto Rico, 00921
787-782-5364 /Fax-787-793-5790
E-mail: wilbert_lopez@yahoo.com

Fill in this information to identify your case:

Debtor 1 **DANIEL RODRIGUEZ ROSA**
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Puerto Rico

Case number (if known) **15-04885**

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed
☐ Not employed

Debtor 2 or non-filing spouse

- ☐ Employed
☐ Not employed

Occupation

CONSERVACION LINEAS

Employer's name

AUTORIDAD DE ENERGIA ELECTRI

Employer's address

PO BOX 363508
Number Street

Number Street

SAN JUAN, PR 00936

City State ZIP Code

City State ZIP Code

How long employed there? **12 years**

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ **3,007.00**

3. Estimate and list monthly overtime pay.

3. + \$ **0.00**

4. Calculate gross income. Add line 2 + line 3.

4. \$ **3,007.00**

Debtor 1

DANIEL RODRIGUEZ ROSA
First Name Middle Name Last Name

Case number (if known) **15-04885**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$ 3,007.00	\$ _____
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 197.00	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ 330.00	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ 478.00	\$ _____
5e. Insurance	5e. \$ 0.00	\$ _____
5f. Domestic support obligations	5f. \$ 848.00	\$ _____
5g. Union dues	5g. \$ 90.00	\$ _____
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 1,943.00	\$ _____
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 1,064.00	\$ _____
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ _____
8b. Interest and dividends	8b. \$ 0.00	\$ _____
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 600.00	\$ _____
8d. Unemployment compensation	8d. \$ 0.00	\$ _____
8e. Social Security	8e. \$ 0.00	\$ _____
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ _____
8g. Pension or retirement income	8g. \$ 0.00	\$ _____
8h. Other monthly income. Specify: CHRISTMAS BONUS	8h. + \$ 45.00	+ \$ _____
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 645.00	\$ _____
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1,709.00	\$ _____
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + \$ 0.00	\$ _____
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 1,709.00	\$ 1,709.00
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: None		

I declare under penalty of perjury that the above information is true

Label Matrix for local noticing

0104-3

Case 15-04885-ESL13

District of Puerto Rico

Old San Juan

Sat Aug 15 17:12:48 AST 2015

ASUME

PO BOX 71414

SAN JUAN, PR 00936-8514

US Bankruptcy Court District of P.R.

Jose V Toledo Fed Bldg & US Courthouse

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San Juan, PR 00901-1964

AT&T

PO BOX 8226

AURORA, IL 60572-8226

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SAN JUAN, PR 00936-4508

BANCO POPULAR DE PUERTO RICO

BANKRUPTCY DEPARTMENT

PO BOX 366818

SAN JUAN PR 00936-6818

DEPARTAMENTO DE TRANS Y OBRAS PUBLICAS

PO BOX 41269

SAN JUAN, PR 00940-1269

FIRST BANK

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SAN JUAN, PR 00908-0146

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The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(u) ASUME-DENISE LOPEZ VIZCARRONDO PO BOX 713

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